

MISSISSIPPI DEPARTMENT OF TRANSPORTATION
OFFICE OF CIVIL RIGHTS
JACKSON, MISSISSIPPI

CERTIFICATION OF PAYMENTS TO SUBCONSULTANTS

PROJECT NUMBER : _____ COUNTY : _____
TERMINI: _____
PRIME CONSULTANT: _____

THIS IS TO CERTIFY THAT PAYMENT HAS BEEN MADE TO THE FOLLOWING SUB-CONSULTANT FIRMS FOR THE AMOUNT INDICATED FOR WORK PERFORMED OR MATERIALS/SUPPLIES PURCHASED, ON THE REFERENCED PROJECT TO SATISFY THE DBE REQUIREMENTS.

*** THIS REPORT IS SUBJECT TO AUDIT ***

DBE FIRM (LISTED ON OCR-481 TO MEET PROJECT GOAL)	Type of Firm	Date of Payment	Amount Paid This Period	Total Paid to Date	Amount of Retainage Withheld	Amount of Retainage Paid	Percent of Retainage Paid	% Sub-Contract Complete

DBE FIRM (NOT LISTED ON OCR-481 TO MEET PROJECT GOAL)	Type of Firm	Date of Payment	Amount Paid This Period	Total Paid to Date	Amount of Retainage Withheld	Amount of Retainage Paid	Percent of Retainage Paid	% Sub-Contract Complete

NON-DBE FIRM	Type of Firm	Date of Payment	Amount Paid This Period	Total Paid to Date	Amount of Retainage Withheld	Amount of Retainage Paid	Percent of Retainage Paid	% Sub-Contract Complete

SUBMITTED BY

TITLE

TOTAL DBE PROJECT GOAL: _____

DATE: _____

*** INSTRUCTIONS ***

1. CONSULTANT MUST SUBMIT THIS REPORT WITH EACH PAYMENT INVOICE TO CONSULTANT SERVICES.
2. IF NO PAYMENTS ARE MADE THIS PERIOD, SUBMIT A NEGATIVE OR NO CHANGE REPORT TO CONSULTANT SERVICES.
3. PROGRESS ESTIMATES MAY BE WITH HELD IF CONSULTANT FAILS TO SUBMIT OCR-484-C.
4. TYPE OF FIRM IS EITHER (S) FOR SUPPLIER, (C) FOR CONTRACTOR, (B) FOR BONDING, (M) FOR MISCELLANEOUS, OR (CS) FOR CONSULTANT.